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would result from the expansion of the disease prevention services of the medical profession. It must be recognized, however, that in general the type of man who is attracted to medicine is by nature more interested in curative processes; and the practice of preventive medicine must for some time be restricted to a few far-seeing physicians. It will develop slowly as the public comes to demand health information from the profession.

Dr. Newsholme asserts that the socialization of medicine in Great Britain is progressing inevitably, rapidly, and beneficially. By socialization he means making such provisions that every member of the community, regardless of his financial condition, may have available all of the medical services which may be needed, and it is held that the further control of medical practice by the state is as natural as the expansion of other community services in sanitation and education. It should be recalled that he is speaking of English and not American conditions and that in this country we are not as favorably inclined to the expansion of state medical control. Although we have followed England in our sanitary development in many particulars, our American public health has developed more under private initiative and less under state organizations; and consequently it is to be expected that this country will move more slowly toward the socialization of medicine.

The history of these important matters in Great Britain as presented by a man who has had twenty years of experience in health administration for the central government and who is able to discuss the problems with the sound judgment and prophetic vision which Dr. Newsholme brings to the task, could not fail to be both instructive and stimulating.

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Workmen's compensation law, as amended by the 1920 session of the general assembly, amendments to become effective July 1, 1920; and the vocational rehabilitation law. (Richmond: Industrial Commission of Virginia. 1920. Pp. 34.)

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